



TRAFFIC VIOLATOR SCHOOL
BRANCH BUSINESS OFFICE/CLASSROOM APPLICATION
Fee: \$70.00 (Nonrefundable)

FOR DEPARTMENT USE	
DATE RECEIVED INSPECTOR OFFICE	
TOTAL FEE	RECEIPT NO.
ISSUED BY	ASSIGNED DISTRICT

SCHOOL NAME (DBA)	BUSINESS TELEPHONE NO. ()	LICENSE NO. TVS
BUSINESS ADDRESS (NUMBER, STREET, CITY AND ZIP)		
CLASSROOM ADDRESS (NUMBER, STREET, CITY AND ZIP)		COUNTY/JUDICIAL DISTRICT
BRANCH BUSINESS OFFICE ADDRESS	CITY	ZIP

If property is LEASED or RENTED

A copy of the lease or rent agreement for use of the room(s) to be used for classes must be attached. It must have: **The property owner's full name, owner's address, type of facility, contact person's full name and daytime telephone number.** Contact person listed should be the **individual** who has knowledge of your agreement for use.

Proposed starting date for classes at this location: _____

(Classes shall not be used until official approval is received.)

NOTE: Indicate classroom telephone number or number to be used on the TVS List. This telephone number must be a current, operative number at the time of application. **CLASSROOM TELEPHONE NO.** _____

SELF CERTIFICATION INFORMATION FOR CLASSROOM

(ALL "NO" ANSWERS MUST BE EXPLAINED IN REMARKS SECTION ON REVERSE)

	YES	NO
1. Is the classroom used exclusively for teaching traffic violators and is it free from distractions during classroom hours?	<input type="checkbox"/>	<input type="checkbox"/>
2. Is the lighting adequate?	<input type="checkbox"/>	<input type="checkbox"/>
3. Describe the seating and writing facilities: _____		
4. Approximate square footage of classroom. Width: _____ ft. X Length: _____ ft. = _____ sq. ft.		
5. The maximum occupancy permitted by local authorities when the facility is used for a classroom is _____. Attach any evidence or documentation available which will confirm the maximum occupancy established by local authorities.		
6. The maximum seating capacity is _____.		
7. Is the facility more than 500 feet from a court?	<input type="checkbox"/>	<input type="checkbox"/>
8. Is the classroom accessible to students with disabilities?	<input type="checkbox"/>	<input type="checkbox"/>
9. Are sanitary and properly maintained restroom facilities readily accessible?	<input type="checkbox"/>	<input type="checkbox"/>
10. Is alcohol consumption or advertising prohibited in the classroom location?	<input type="checkbox"/>	<input type="checkbox"/>
11. Is parking or public transit readily accessible?	<input type="checkbox"/>	<input type="checkbox"/>

NOTE: Per California Code of Regulations, Section 345.40, a schedule must be on file with the department before the classroom may be used.

I have checked for compliance with safety regulations and the location meets all requirements of state law and local ordinances.

I hereby certify under penalty of perjury under the laws of the State of California that the information I have provided is true and correct.

DATE	SIGNATURE X	TITLE
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